PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUEFEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

									<u></u>	
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	ed below or directed of	for tran ng the l herwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new c	CA' of orr	TION FEE (if requestion maintenance fees we respondence address;	ired). I vill be and/o	Blocks 1 through 5 sh mailed to the current r (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
136 7590 05/24/2007						Cer	tificate	e of Mailing or Transr	nission	
JACOBSON HOLMAN PLLC 400 SEVENTH STREET N.W. SUITE 600						I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WASHINGTON, DC 20004						(Depositor's name)				
						(Signature)				
									(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN			OR ATTORNEY DOCKET NO		RNEY DOCKET NO.	CONFIRMATION NO.	
10/534,505 05/11/2005				Lisen Elmberg				P70579US0 5048		
FITLE OF INVENTION: CHILD HARNESS										
									·	
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO \$1400		\$300		\$0		\$1700	08/24/2007	
EXAMINER			ART UNIT	CLASS-SUBCLASS		7				
ABBOTT, YVONNE RENEE 3644				119-770000	_					
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list JACOBSON HOLMAN PLIC										
CFR 1.363). Change of correspondence address (or Change of Correspondence				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form				(2) the name of a registered attorney	t) the name of a single firm (having as a member a gistered attorney or agent) and the names of up to					
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2 registered patent	d patent attorneys or agents. If no name is ame will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
BABY BJORN AB Danderyd, SWEDEN										
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government										
la. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)										
Issue Fee (1400) ☐ A check is enclos ☐ Publication Fee (No small entity discount permitted) (300) ☐ Payment by credi						ard. Form PTO-2038	is atta	ached.(1700)		
						ereby authorized to charge the required fee(s), any deficiency, or credit any Deposit Account Number 06-1358 (enclose an extra copy of this form).				
5. Change in Entity Sta	tus (from status indicate	d above)	1 2		- E				
	s SMALL ENTITY state							TITY status. See 37 CF		
nterest as shown by the	d Publication Fee (if req records of the United Sta	uired) v	vill not be accepte ent and Trademark	Office.	nan	the applicant; a regi	sterea	attorney or agent; or the	e assignee or other party in	
Authorized Signature	1		08/24/2807 SZEWDIEZ B0800055 10534505 Date 23 August 2007							
Typed or printed nam	e Harvey B.	Tadol	oson, Jr.	····		01 FC:150 Re ģi šu ālio 650		20,851	1400.00 OP 300.00 OP	
submitting the complete	d application form to the	e HSPT	I ime will varv	depending upon the	ind	lividual case. Anv co	mmen	ts on the amount of tin	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O.	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.